

Statement of Subcommittee Chairwoman Rep. Martha McSally (R-AZ) Border and Maritime Security Subcommittee

"An Unsecure Border and the Opioid Crisis: The Urgent Need for Action to Save Lives"

May 30, 2018

Remarks as Prepared

Opioid abuse has become an epidemic across the entire Nation, effecting all 50 states.

115 Americans die every single day from an opioid overdose. These victims come from all walks of life, they are teachers, business professionals, ranchers, students, government officials, and retirees. And here in Arizona there have been at least 800 lives lost just last year alone.

Some estimates conclude that more than two million of our fellow Americans are addicted to opioids. Chances are every single one of us knows someone struggling with opioid dependence.

No state, no neighborhood, no socioeconomic group, no family is immune from the destruction and carnage that it brings.

Too many lives have been lost, too many families have been destroyed, and communities all over the Nation are asking what more can be done to stop this devastating opioid addiction epidemic?

I have called this hearing today to not only highlight the opioid crisis, but to discuss both law enforcement and non-law enforcement solutions that will ultimately save lives.

Thankfully, this is not a partisan issue.

I am grateful to see my colleagues, both Republicans and Democrats, here today so we can work together to identify the challenges and enact solutions to help families in our communities.

Action to address this crisis will require multiple State, federal local, tribal governments to work together, in concert with non-profit entities and the faith-based community.

No one can go it alone, because this issue will require a whole of society approach.

Addiction often begins after powerful opioids are routinely prescribed out of a genuine need to manage pain after surgery; however, patients quickly become hooked, often unaware of how addicting opioids are.

In addition, even after the risks were well known, unethical doctors continued to write prescription after prescription becoming "pill mills" that sustained the flow of opioids to those who are addicted.

Last year, four of Arizona's top opioid-prescribing doctors were located in the sparsely populated Mohave County. Together they wrote prescriptions for nearly 6 million pills over a 12-month period.

An unsecure border enables and exacerbates this crisis by providing a strong supply of illicit versions.

Securing the border is more than just stopping illicit movement of people and contraband between the ports of entry. Since I have been chair of this subcommittee, I have also focused on modernized infrastructure, technology, and additional manpower at our nation's ports of entry.

It is well known that the overwhelming majority of drugs, maybe as high as 90 percent, that enter our country come in through the Nation's ports of entry such as the ones in Nogales and Douglas. Illicit opiates are no exception.

Deep concealment within vehicles, or in cargo is the preferred method of the drug cartels. And they are very successful, despite the best efforts of the men and women of U.S. Customs and Border Protection.

To ensure the speedy movement of commerce that powers our economy, we can only X-Ray a fraction of the vehicles and trucks that cross the border every day. We need more detection equipment and more tools for CBP to effectively combat the illicit drug flow hidden in legitimate travel and commerce.

I'm proud to announce that I will be hosting Secretary of Homeland Security Nielsen tomorrow at two ports of entry — Douglas and Nogales, so that she can see firsthand the needs that we have at ports in Arizona.

I have been a tireless advocate for the expansion and modernization of the Douglas port of entry because our economic growth and national security rely on well-equipped ports.

In addition to the challenges at ports of entry, Fentanyl, an opioid about 100 times stronger than morphine, is being produced illicitly in large quantities, chiefly in China, but also increasingly in Mexico. The primary smuggling route from China and into the U.S. is through our mail system, where vulnerabilities in the postal system are exploited.

In order to mitigate these illicit pathways, we must secure the border and strengthen our postal system. In addition, we must increase the detection capabilities of law-enforcement, on every level, as they respond to this disaster.

However, this is just one part of the solution. Law enforcement and increased border security alone will never be enough.

We cannot enforce our way out of this problem.

We must also tackle this crisis with treatment and recovery options that help restore individuals to health and break the cycle of addiction.

Educating patients on the risks of taking properly prescribed opioids must be standard medical practice. With respect to those doctors who unethically prescribe these medications, they must be held accountable.

And most of all, we must support those who suffer from addiction, their families, and loved ones – to ensure that they can get the help they so desperately need.

I am very proud to say that the state of Arizona has been a national leader in addressing the challenges of opioid abuse head on.

Faced with a growing crisis, Governor Ducey declared the opioid crisis a public-health emergency in June of last year. Then, the Governor called a four-day special session of the state legislature at the beginning of this year and signed The Arizona Opioid Epidemic Act.

The legislation takes aggressive steps to address opioid addiction, hold bad actors accountable, expand access to treatment, and provide life-saving resources to first responders, law enforcement, and community partners.

On the Federal level, Congress has been engaged in tackling this problem as well.

Legislation that passed in the Homeland Security Committee and later became law provided additional fentanyl and synthetic opioids detection equipment for front line CBP officers – the INTERDICT Act.

Over the last few months 57 bills that address this public health crisis are making their way through the House of Representatives. These bills would provide new authority to:

Spur urgently needed research on new non-addictive pain medications

Ensure medical professionals have access to a consenting patient's complete health history when making treatment decisions.

Provide resources for hospitals to develop protocols for discharging patients who have presented with an opioid overdose.

Establish Comprehensive Opioid Recovery Centers that will serve as models for comprehensive treatment and recovery.

Direct the FDA to work with manufacturers to establish programs for efficient return or destruction of unused opioids.

And the Fiscal Year 2018 appropriations bill provided over \$4 billion dollars in funding for the development of opioid alternatives, grants for States to respond to this challenge, new funds for equipment to inspect more incoming mail packages as well as more x-ray devices at ports of entry.

This is a complicated, and multifaceted problem.

There are no quick, or easy solutions. I have invited witnesses who deal with this issue from many different angles to testify this morning.

On the following panels we will hear from law enforcement and border security experts, as well as experienced professionals from the public sector, those with a family member or were themselves addicted to opioids and found the support they needed to get and stay clean.

I look forward to the testimony from our witnesses today, as we search for solutions to this grave crisis that affects too many of our fellow Americans.

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